

County of San Bernardino VISION PLAN ENROLLMENT/CHANGE

Eligible employees in the Exempt, Firefighter Local 935, Safety, Safety Management & Supervisory, Specialized Peace Officer Supervisory, Specialized Peace Officer, Nurses, and Probation bargaining units may enroll their eligible dependents in the County paid vision plan.

REFERENCES

Employee Benefits Guide, Memoranda of Understanding, Compensation Plan, and/or Summary Plan Description.

FORMS REQUIRED MANDATORY FIELDS

Vision Plan Enrollment/Change – Eligible Units form

Office form

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GENERAL INFORMATION

Eligible employees are automatically enrolled in the County paid vision plan. Eligible dependents may be enrolled by completing the *Vision Plan Enrollment/Change – Eligible Units form.*

If requesting services outside of the vision plan network, a *Vision Claim form*_must be submitted with receipts to Employee Benefits & Services Division-Human Resources (EBSD-HR) for reimbursement.

ACCEPTABLE DOCUMENTATION FOR DEPENDENT ELIGIBILITY (ADD OR DELETE)

Copy of:

- Marriage Certificate/registration of domestic partnership
- Birth Certificate (including hospital issued)
- Death Certificate
- Court issued adoption placement paperwork
- Divorce Decree/dissolution of domestic partnership

EMPLOYEERESPONSIBILITIES

- If adding dependent(s), obtain and complete the Vision Plan Enrollment/Change Eligible Units form
- Provide documentation for each dependent that is being added to the vision plan
- ♦ Retain copy for file
- Submit to department payroll specialist

PAYROLL SPECIALIST RESPONSIBILITIES

- ♦ Provide employee with the Vision Plan Enrollment/Change Eligible Units form
- Audit for completeness
- Complete appropriate JAR packet
- Retain copies for department file
- ♦ Forward original to EMACS-HR (0030)

RELATED FORMS

Checklist - Contract to Regular

Checklist - Extra-Help-Recurrent-PSE to Contract Checklist - Extra-Help-Recurrent-PSE to Regular

Checklist - New Hire-Contract Checklist - New Hire-Exempt

Checklist - New Hire-Regular-Part-time-Reemployment (Rehire)

Checklist - Regular to Contract

Checklist - Return from Leave (With Right - Without Right - Medical Leave of Absence)

Vision Claim form